



PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

27045 7590 06/24/2004

ERICSSON INC.
6300 LEGACY DRIVE
M/S EVR C11
PLANO, TX 75024

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Pam Ewing (Depositor's name)
Pam Ewing (Signature)
September 15, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/590,172	06/09/2000	Lars Bohlin	040060-113	3386

TITLE OF INVENTION: METHOD FOR SUPERVISING PARALLEL PROCESSES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	09/24/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
TORRES, JOSEPH D	2133	714-732000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE
Telefonaktiebolaget LM Ericsson

(B) RESIDENCE: (CITY and STATE OR COUNTRY)
Stockholm, Sweden

Please check the appropriate assignee category or categories (will not be printed on the patent):

4a. The following fee(s) are enclosed: ☒ individual ☒ corporation or other private group entity ☐ government☒ Issue Fee☐ Publication Fee☐ Advance Order - # of Copies

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1379 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

9-15-04

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

09/16/2004 CNGUYEN1 00000005 501379 09590172
01 FC:1501 1330.00 DA

TRANSMIT THIS FORM WITH FEE(S)

PAGE 3/3 * RCVD AT 9/15/2004 10:34:29 AM [Eastern Daylight Time] * SVR:USPTO-EFXXRF-2/1 * DNIS:7464000 * CSID:9725837864 * DURATION (mm-ss):01-28



EUS/I/P:04-5586

VIA FACSIMILE

Mail Stop ISSUE FEE
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Certificate of Mailing or Transmission

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage for Express Mail or First Class Mail in an envelope addressed to Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO, on the date indicated below.

Name: Pam EwingSignature: Pam Ewing

Re: Patent Application for:
"Method for Supervising Parallel Processes"
Serial No. 09/590,172
Attorney Docket No. P11088-US1

Dear Sir or Madam:

Enclosed for filing please find the following items relating to the above-identified application:

- (1) Part B – Fee(s) Transmittal (in duplicate)

The Commissioner is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1379.

If you have any questions or comments concerning this matter, please feel free to contact the undersigned at 972-583-7686.

Sincerely,


John Han
Associate General Counsel-IPR
JCH/pe

Ericsson Inc.
6300 Legacy Drive
Plano, Texas 75074

